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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/640,602
Filing Date	08/13/2003
First Named Inventor	LOWRY, Melanie
Art Unit	3765
Examiner Name	HALE, Gloria M.
Attorney Docket Number	21290-RA

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 30184

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Client has repeatedly failed to respond to correspondence and to pay outstanding balances.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Melanie Lowry				
Address	1615 Cobb Parkway, Apt. 1204				
City	Marietta	State	Georgia	Zip	30062
Country	U.S.				
Telephone	678-754-5705			Email	mlowry@sdbell.com
Signature					
Name	Sandra M. Sovinski, Esq.			Registration No.	45,781
Date	1-24-2006			Telephone No.	(770) 541-7444

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket # 21290-RA

January 24, 2006

In re Application of: **LOWRY, Melanie**  
Filed: August 13, 2003  
Serial Number: 10/640,602  
For: **Thigh Slimming Garment and Method Thereof**

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Enclosed for filing is a *Request For Withdrawal As Attorney Or Agent And Change of Correspondence Address* and a Return Receipt Postcard. The undersigned respectfully requests removal from the above application as the attorney-of-record and the correspondence address changed to the address identified in the Request.

Respectfully submitted this 24<sup>th</sup> day of January 2006.

Sincerely,

Sandra M. Sovinski, Esq.  
Reg. No. 45,781

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## CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as:

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in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

January 24, 2006  
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Teri L. Bonica  
(Name of Person Mailing)

  
(Signature of Person Mailing)

January 24, 2006  
(Date)